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31718 7590 05/10/2005

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Donna Miller	(Depositor's name)
Donna Miller	(Signature)
6-29-05	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/712,968	11/12/2003	Robert K. Froom	03-217-B	9417

TITLE OF INVENTION: ANTISPASTICITY AID DEVICE AND RELATED ACCESSORIES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	08/10/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
DOSTER GREENE, DINNATIA JO	3743	602-021000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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1 David A. Belasco
 2 Belasco Jacobs &
 3 Townsley, LLP

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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(A) NAME OF ASSIGNEE

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Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☐ Corporation or other private group entity ☐ Government

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- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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